



# State of South Carolina

AMENDMENT NO. ONE

Solicitation Number: 2000175193.  
Date Issued: January 31, 2011  
Procurement Officer: Michelle Robison, CPPB  
Phone: 803-898-3469  
E-Mail Address: [robinsnma@dhec.sc.gov](mailto:robinsnma@dhec.sc.gov)

DESCRIPTION: **Provide Pharmacy Benefit Management (PBM) Services**

USING GOVERNMENTAL UNIT: **South Carolina Department of Health and Environmental Control**

*The Term "Offer" Means Your "Bid" or "Proposal". Your offer must be submitted in a sealed package. Solicitation Number & Opening Date must appear on package exterior. See "Submitting Your Offer" provision.*

SUBMIT YOUR SEALED OFFER TO EITHER OF THE FOLLOWING ADDRESSES:

**MAILING ADDRESS:**

SC DHEC – Division of Procurement Services  
Bureau of Business Management  
2600 Bull Street  
Columbia, S.C. 29201

**PHYSICAL ADDRESS:**

SC DHEC – Division of Procurement Services  
Bureau of Business Management  
2600 Bull Street, Room 120 – Aycock Bldg.  
Columbia, S.C. 29201

SUBMIT OFFER BY (Opening Date/Time): **02/15/2011 2:30 pm** (See "Deadline For Submission Of Offer" provision)

QUESTIONS MUST BE RECEIVED BY: **02/07/2011 5:00 pm** (See "Questions From Offerors" provision)

NUMBER OF COPIES TO BE SUBMITTED: **One (1) original and three (3) copies marked as "Copy"**

CONFERENCE TYPE: **Not Applicable**  
DATE & TIME:

LOCATION: **Not Applicable**

(As appropriate, see "Conferences - Pre-Bid/Proposal" & "Site Visit" provisions)

**AWARD &  
AMENDMENTS**

Award will be posted on **03/01/2011**. The award, this solicitation, any amendments, and any related notices will be posted at the following web address: <http://www.procurement.sc.gov>

Unless submitted on-line, you must submit a signed copy of this form with Your Offer. By submitting a bid or proposal, You agree to be bound by the terms of the Solicitation. You agree to hold Your Offer open for a minimum of **sixty (60)** calendar days after the Opening Date.  
(See "Signing Your Offer" and "Electronic Signature" provisions.)

**NAME OF OFFEROR**

(full legal name of business submitting the offer)

Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, i.e., a separate corporation, partnership, sole proprietorship, etc.

**AUTHORIZED SIGNATURE**

(Person must be authorized to submit binding offer to contract on behalf of Offeror.)

**TAXPAYER IDENTIFICATION NO.**

(See "Taxpayer Identification Number" provision)

**TITLE**

(business title of person signing above)

**STATE VENDOR NO.**

(Register to Obtain S.C. Vendor No. at [www.procurement.sc.gov](http://www.procurement.sc.gov))

**PRINTED NAME**

(printed name of person signing above)

**DATE SIGNED**

**STATE OF INCORPORATION**

(If you are a corporation, identify the state of incorporation.)

OFFEROR'S TYPE OF ENTITY: (Check one)

(See "Signing Your Offer" provision.)

☐ Sole Proprietorship

☐ Partnership

☐ Other \_\_\_\_\_

☐ Corporate entity (not tax-exempt)

☐ Corporation (tax-exempt)

☐ Government entity (federal, state, or local)

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**(Return Page Two with Your Offer)**

<b>HOME OFFICE ADDRESS</b> (Address for offeror's home office / principal place of business)	<b>NOTICE ADDRESS</b> (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)		
	Number - Extension      Facsimile		Area Code -
	E-mail Address		

<b>PAYMENT ADDRESS</b> (Address to which payments will be sent.) (See "Payment" clause)	<b>ORDER ADDRESS</b> (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)		
	_____ Order Address same as Home Office Address		
	_____ Order Address same as Notice Address (check only one)		

\_\_\_\_\_ Payment Address same as Home Office Address  
\_\_\_\_\_ Payment Address same as Notice Address (check only one)

ACKNOWLEDGMENT OF AMENDMENTS							
Offerors acknowledges receipt of amendments by indicating amendment number and its date of issue. (See "Amendments to Solicitation" Provision)							
Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date

<b>DISCOUNT FOR PROMPT PAYMENT</b> (See "Discount for Prompt Payment" clause)	10 Calendar Days (%)	20 Calendar Days (%)	30 Calendar Days (%)	_____ Calendar Days (%)

## **AMENDMENT #1**

**Description:** Provide Pharmacy Benefit Management (PBM) Services.

**Solicitation No.** 2000175193.

**AMENDMENTS TO SOLICITATION (DHEC – FEB 2007)** – (a) The Solicitation may be amended at any time prior to opening. All actual and prospective Offerors should monitor the following web site for the issuance of Amendments: <http://www.scdhec.gov/procurement> (b) Offerors shall acknowledge receipt of any Amendment to this solicitation (1) by signing and returning the amendment (2) by identifying the amendment number and date in the space provided for this purpose on Page Two, (3) by letter, or (4) by submitting a bid that indicates in some way that the bidder received the amendment. (c) If this solicitation is amended, then all terms and conditions which are not modified remain unchanged.

The solicitation is amended as follows:

**Correction of Procurement Officer's e-mail address: The correct e-mail address is:**  
**[robinsma@dhec.sc.gov](mailto:robinsma@dhec.sc.gov)**